| DATENT | ADDI IC | MOITA | CCC DCT | COMMAT  | ON RECORD |
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| fective October 1, 2001 | G7930-0001/Pa | ୭୧/ |
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| Effective October 1, 2001  |                    |   |              |                               |              |                  | G                 | 793                 | 0                      | -000                       | 1/pod               |                        |
|--|--------------------|---|--------------|-------------------------------|--------------|------------------|-------------------|---------------------|------------------------|----------------------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |                    |   |              |                               |              |                  | SMALL ENTITY TYPE |                     |                        | OTHER THAN OR SMALL ENTITY |                     |                        |
| TOTAL CLAIMS   |                    |   | 12           | 22                            |              |                  |                   | RATE                | FEE                    | 1                          | RATE                | FEE                    |
| FOR  |                    |   | NUMBER       | FILED                         | NUMB         | ER EXTRA         |                   | BASIC FEE           | 370.00                 | OR                         | BASIC FEE           | 740.00                 |
| то   | TAL CHARGEA        | BLE CLAIMS                                | /22mir       | nus 20=                       | * 10         | 2 x\$ 9          |                   |                     |                        | OR                         | X\$18=              | 1836.                  |
| IND  | EPENDENT CL        | AIMS                                      | 15 mi        | minus $3 = * /2$ .            |              |                  |                   | X42=                |                        | OR                         | X84=                | į                      |
| MU   | LTIPLE DEPEN       | IDENT CLAIM PI                            | RESENT       | NT 🔲                          |              |                  |                   | +140=               |                        | 1                          | +280=               | locs.                  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |                    |   |              |                               | Ĺ            | TOTAL            |                   | OR<br>OR            | TOTAL                  |                            |                     |                        |
|  | · c                | LAIMS AS A                                | MENDER       | ) - PAR                       | TII          |                  |                   | TOTAL               | <u> </u>               | JON                        | OTHER               | THAN                   |
|  |                    | (Column 1)                                |              | (Colur                        | mn 2)        | (Column 3)       |                   | SMALL               | ENTITY                 | OR                         | SMALL               |                        |
| AMENDMENT A  |                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON  | Total              | *   | Minus        | **                            |              | =                |                   | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| AME  | Independent        | *   | Minus        | ***                           |              | =                |                   | X42=                |                        | OR                         | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |                    |   |              |                               |              | +140=.           |                   | OR                  | +280=                  |                            |                     |                        |
|  |                    |   |              |                               |              |                  | L                 | TOTAL<br>ADDIT. FEE |                        |                            | TOTAL<br>ADDIT, FEE |                        |
|  |                    | (Column 1)                                |              | (Colur                        | mn 2)        | (Column 3)       | ,                 | יטטוו. רבב ן        |                        |                            | ADDII. PEEI         |                        |
| AMENDMENT B  |                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| Š  | Total              | *   | Minus        | **                            |              | =                |                   | X\$ 9=              |                        | OR                         | X\$18=              | h 1                    |
| AME  | Independent        | *   | Minus        | ***                           | - 01 4114    | =                | Ī                 | X42=                |                        | OR                         | X84=                |                        |
|  | FIRST PRESE        | NTATION OF MU                             | JLI IPLE DEI | PENDENI                       | CLAIM        |                  |                   | +140=               |                        | OR                         | +280=               |                        |
|  |                    |   |              |                               |              |                  | L                 | TOTAL<br>DDIT. FEE  |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |
|  |                    | (Column 1)                                |              | (Colur                        |              | (Column 3)       |                   |                     |                        |                            |                     |                        |
| AMENDMENT C  |                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |                   | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| NDN  | Total              | *   | Minus        | **                            |              | =                |                   | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| AME  | Independent        | *   | Minus        | ***                           | COLAINA      | =                | ľ                 | X42=                |                        | OR                         | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |                    |   |              |                               |              |                  |                   |                     |                        |                            |                     |                        |
|  |                    | mn 1 is less than the                     |              |                               |              |                  | L                 | TOTAL               |                        | l<br>∩¤                    | TOTAL<br>ADDIT. FEE |                        |
|  | If the "Highest Nu |   |              |                               |              |                  |                   | DDIT. FEE           |                        |                            | ACDIT CCC           |                        |